Ellective October 1, 2000						09/890 58/				
CLAIMS AS FILED - PART I						L ENTIT		···	HER THAN	
TOTAL CLA	IMS /	(CO	(Column 1) (Column 2)		TYPE			OR . SMA	LL ENTITY	
FOR		NUM	NUMBER FILED NUM		RAT BASIC	<del></del>		RAT		
TOTAL CHAR	GEABLE CLAIM				- BASIC			OR BASIC I	FEE X6 C	
INDEPENDEN		s   25			X\$ 9	)=		OR X\$18	=97	
	PENDENT CLAIM	A PRESENT	minus 3 =		X40	=	, c	OR X80=	. /	
					+135	=		R +270:	_	
* If the differen	nce in column 1	is less that	less than zero, enter "0" in column 2			ı.L	J`	R TOTAL		
3-1-00	- CLAINS AS	AMEND	ED - PART II						ER THAN	
	(Column 1	)	(Column 2	(Column 3	) SMAL	L ENTIT	Y O		L ENTITY	
Total Independent	REMAINING AFTER AMENDMEN		NUMBER PREVIOUSL PAID FOR	Y PRESENT EXTRA	RATE	ADD TION	AL	RATE	ADDI- TIONAL FEE	
Total	. 25	Minus	. 25	=	.X\$ 9=		OF	X\$18=		
Independen	1 0	Minus	•••	=	X40=	+	7	`	+	
PINST PHE	SENTATION OF	MULTIPLE D	EPENDENT CLA	IM []	]	+	OF	<b>'</b>	eq	
	,			•	+135=		OR	I		
•					ADDIT. FE		OR	ADDIT. FEE	E	
	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	1					
	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total Independent	•	Minus	**	E	X\$ 9=		OR	X\$18=		
Independent	•	Minus	***	=	X40=	<del>                                     </del>		X80=	<b> </b>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	OR			
					+135=		OR	+270=		
					ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) CLAIMS		. (Column 2)  HIGHEST	(Column 3)			_		•	
	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Total	•	Minus	••	=	X\$ 9=			X\$18=	FEE	
Independent	17777	Minus	•••	=	X40=		OR	<del></del>		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	X80=		
the entry in column 1 is less than the entry in column 2, write "0" in column 3.  the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  And the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							OR	+270=		
			SPACE is less that independent) is the		ADDIT. FEE		OR AC	NO 8		
PTO 674	. 5					- , OVA	<b></b>	art.		

Application or Docket Number